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## BIB DATA SHEET

CONFIRMATION NO. 9819

|  |   |                                   |   |  |                                    |
|--|---|-----------------------------------|---|--|------------------------------------|
| <b>SERIAL NUMBER</b><br>10/816,603   | <b>FILING or 371(c)<br/>DATE</b><br>04/02/2004<br><b>RULE</b>   | <b>CLASS</b><br>435               | <b>GROUP ART UNIT</b><br>1639   | <b>ATTORNEY DOCKET<br/>NO.</b><br>1505-68152 |                                    |
| <b>APPLICANTS</b><br>Martin N. Wybourne, Hanover, NH;<br>James E. Hutchison, Eugene, OR;<br><b>** CONTINUING DATA *****</b><br>This application is a CON of 10/013,334 11/05/2001 ABN<br>which is a CON of 09/085,390 05/27/1998 ABN<br>which claims benefit of 60/047,804 05/27/1997<br><b>** FOREIGN APPLICATIONS *****</b><br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b><br>06/21/2004 |   |                                   |   |  |                                    |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Verified and Acknowledged <u>/MARK L SHIBUYA/</u><br>Examiner's Signature  | <input type="checkbox"/> Met after Allowance<br>ms<br>Initials  | <b>STATE OR<br/>COUNTRY</b><br>NH | <b>SHEETS<br/>DRAWINGS</b><br>11  | <b>TOTAL<br/>CLAIMS</b><br>3                 | <b>INDEPENDENT<br/>CLAIMS</b><br>1 |
| <b>ADDRESS</b><br>KLARQUIST SPARKMAN, LLP<br>121 SW SALMON STREET<br>SUITE 1600<br>PORTLAND, OR 97204<br>UNITED STATES   |   |                                   |   |  |                                    |
| <b>TITLE</b><br>Scaffold-organized metal, alloy, semiconductor and/or magnetic clusters and electronic devices made using such clusters  |   |                                   |   |  |                                    |
| <b>FILING FEE<br/>RECEIVED</b><br>385  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                                    |